U.S. Immigration and Customs Enforcement (ICE)
Detainee Death Report: ALCORTA-Rodriguez, Felix

IMMIGRATION AND CRIMINAL HISTORY

Mr. ALCORTA-Rodriguez, a 63-year-old male citizen of Mexico, was encountered by ICE Enforcement and Removal Operations (ERO) Harlingen on June 16, 2026, following his release from Webb Conty Jail (WCJ). ERO Harlingen served him with a Notice to Appear, pursuant to sections 212(a)(6)(A)(i) and 212(a)(7)(A)(i)(I) of the Immigration and Nationality Act (INA), as an alien present in the United States without admission, and as an immigrant without an immigrant visa. He was subsequently detained at Webb County Detention Center (WCDC), in Laredo, Texas (TX). Mr. ALCORTA-Rodriguez criminal history extended from July 18, 1984, to February 5, 2018.

SYNOPSIS OF EVENTS

On June 16, 2026, at 1:10 p.m., a licensed vocational nurse (LVN) completed Mr. ALCORTA Rodriguez's medical intake screening, recorded normal vital signs, documented bilateral swelling of the upper and lower extremities, and noted his history of diabetes and prescriptions to treat various chronic health conditions. The LVN performed an electrocardiogram (EKG) and referred him to an advanced practice provider (APP).

- **At 3:18 p.m.,** an APP evaluated Mr. ALCORTA Rodriguez, consulted with medical staff from the transferring jail. The APP noted he did not receive his daily medication and had a planned physician appointment for the same day. The APP recorded normal vital signs, except for an increased respiratory rate, and observed pitting edema of both hands (3+), pitting edema of both lower extremities (2+), jugular vein distention, abdominal distention, and dry, cracked, discolored skin to lower extremities. The APP referenced an abnormal EKG, prescribed Mr. ALCORTA Rodriguez' current medication regimen except for the antibiotic, determined he required intravenous furosemide, and arranged transport by facility van to the Laredo Medical Center (LMC) emergency room for further evaluations.

Between June 16 and 18, 2026, LMC medical staff treated Mr. ALCORTA Rodriguez for Anasarca, ascites, and shortness of breath. Staff administered oxygen, intravenous diuretics and antibiotics, performed paracentesis, and addional medication intravenously. Chest x-ray results showed moderate cardiomegaly. An arterial doppler ultrasound of his lower extremities showed no significant stenosis in any evaluated artery. Echocardiogram results revealed severe left ventricular systolic dysfunction with an ejection fraction and a severely elevated B-type natriuretic peptide.

On June 18, 2026, Mr. ALCORTA Rodriguez was transported back to WCDC and placed in the medical observation housing unit. A registered nurse (RN) evaluated him, documented his reported improvement in symptoms and denial of medical concerns, and recorded edema (+1) on both lower extremities.

On June 19, 2026, **at 8:03 a.m.**, an RN evaluated Mr. ALCORTA Rodriguez. The RN documented his denial of medical concerns and improved symptoms, recorded normal vital signs, (+1) edema on both lower extremities with dry, scaly skin, (+1) pitting edema on the right upper extremity, and

a mildly distended abdomen.

- **At 9:14 a.m.**, an APP evaluated Mr. ALCORTA Rodriguez in the medical observation housing unit. The APP documented his history of intravenous drug use, cerebral bleed 13 years ago, a new hospital diagnosis of liver cirrhosis, and removal of abdominal fluid through paracentesis. Mr. ALCORTA Rodriguez reported that hospital staff performed an echocardiogram (normal), and venous and arterial ultrasound of lower extremities (normal). The APP recorded normal vital signs, (+2) nonpitting edema on lower extremities, abdominal distention, and abrasions on his right shin. The APP increased his spironolactone dosage, authorized an extra pillow, bottom bunk, and facility healthy diet, ordered wound care for his right shin, and daily blood pressure and blood sugar checks, and scheduled laboratory tests and an EKG in three weeks, with clinic follow-up in one month.
- **Between 9:10 and 9:14 p.m.**, Mr. ALCORTA Rodriguez's cellmates alerted a custody officer to check on him. Custody staff entered the dorm, found Mr. ALCORTA Rodriguez unresponsive, pulseless, and not breathing, called a medical emergency over the radio, and administered cardiopulmonary resuscitation (CPR).
- **At 9:15 p.m.**, medical staff entered the dorm, checked for a pulse (none was present), noted Mr. ALCORTA Rodriguez's abdominal distention and cyanosis of the mouth, hands, and feet, and began chest compressions while custody staff contacted EMS.
- **At 9:16 p.m.**, medical staff placed an automated external defibrillator (AED) on Mr. ALCORTA Rodriguez. The AED detectable no pulse and no shocks were advised or delivered. WCDC staff continued CPR.
- **Between 9:19 and 9:27 p.m.**, WCDC staff loaded Mr. ALCORTA Rodriguez onto a gurney and transferred him to the facility's receiving and discharge area, continuing CPR throughout the transfer.
- **Between 9:29 and 9:38 p.m.**, EMS staff arrived on-site, assumed care of Mr. ALCORTA Rodriguez, and transported him by ambulance to LMC.
- **Between 9:38 and 10:02 p.m.**, LMC medical staff assumed care of Mr. ALCORTA Rodriguez, continued life-saving measures, and performed a bedside ultrasound, which revealed blood clot in the right atrium extending into the inferior vena cava.
- **At 10:02 p.m.**, an LMC physician pronounced Mr. ALCORTA Rodriguez deceased.